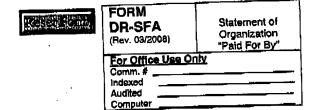


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## FOR INSTRUCTIONS SEE BACK OF FORM

[27] am filling this form to use the shorter "paid for by" attribution. The committee will not be crossing the \$750 threshold." This form must be filled prior to the distribution or posting of the political material.

City, State ↓ ↓ Zip Code ↓ ↓  City, State ↓ ↓ Zip Code ↓ ↓  Phone ( )  e-Mail  INDICATE PURPOSE OF COMMITTEE - Check One Box Advocate for/a  Comment or description:  All Candidates Enter:  Office Sought:	BRILEY  PAC (3) State Party (4) County Central Committee polivision Candidate (8) County PAC (9) City PAC diuding committee involved in multiple city/county ballot issues)  PATE (mandatory except for a non-candidate committee)  PAD BRILEY Address + Pacage Aug  Aug  To Jacob + Pacage  To Jacob + Pa
IMPORTANT: Indicate type of committee you are registering for:   7     (1) StateWildloYLagistative/Judge Standing for Retention Candidate (2) StateWildloYLagistative/Judge Standidate (7) School Board or Other Political Standidate (11) Local Ballot issue (II) School Board or Other Political Standidate (11) Local Ballot issue (II) Committee CHAIR (mandatory for all committees except a candidate's committee)    Name	BRILEY  PAC (3) State Party (4) County Central Committee polivision Candidate (8) County PAC (9) City PAC polivision Candidate (8) County PAC (9) City PAC polivision Candidate (8) County PAC (9) City PAC political Committee involved in multiple city/county ballot issues)  PATE (mandatory except for a non-candidate committee)
MPORTANT: Indicate type of committee you are registering for:	PAC (3) State Party (4) County Central Committee belivision Candidate (8) County PAC (9) City PAC (19) City PAC (1
COMMITTEE CHAIR (mandatory for all committees except a candidate's committee)  Name   Malling Address   City, State   City, State   Phone ( ) Phone   Phone ( ) Phone   Phone   Phone   Advocate for all candidates Enter:   Office Sought:   Comment or description:	ATE (mandatory except for a non-candidate committee)  HAD BRILEY  Address + + Zip Code + + Zip Code + + Sovo /  Strong TO TOWN TO TOWN TOWN TOWN TOWN TOWN TOW
Malling Address + + Zip Code +	Address + Discrete Aug. Aug. Aug. Aug. Aug. Aug. Aug. Aug.
Mailing Address   City, State   Zip Code   Phone ( )  Phone ( )  Phone   Mailing   City, State   Phone ( )  Phone   Advocate for/a   Comment or description:  Comment or description:	Address 1  AD TROWN - AUE  THE 1 ZIP CODE 1  STON IN TOWN    TO BRUEY B IDWATELEON (VET  Desiret candidate(a)   Advocate for ballot issue(s)
Phone ( )	TC BRILEY @ TOWATELECOM . (VET
e-Mail  INDICATE PURPOSE OF COMMITTEE - Check One Box Advocate for/a Comment or description:  All Candidates Enter: Office Sought:  SCHOOL BOSCO  COMMITTEE - Check One Box Advocate for/a Comment or description:	7C BRILEY & JOUATELECON . (VET
INDICATE PURPOSE OF COMMITTEE - Check One Box Advocate fortal Comment or description:  All Candidates Enter: Office Sought:	painst candidate(a) Advocate for ballot issue(s)
Comment or description:  All Candidates Enter: Office Sought:  Continued Party (if applicable)	gainst candidate(a) Advocate for ballot issue(s) Advocate against ballot issue(s)
	ounty/Local Candidates and All Other Committees Enter: ounty:
•	atewide")
	ate of Election: SEPT. 09
Year Standing for Election: OB	the second secon
STATEMENT OF AFFIRMATION: By filing this document the committee affirms the fo	•
<ol> <li>The committee and all persons connected with the committee understand that they are stules in Chapter 351 of the lows Administrative Code.</li> </ol>	
<ol> <li>That lows Code section 68A.405 and rules 351—4.38 through 4.43 require the placeme materials except for those items exempted by statute or rule.</li> </ol>	nt of the words "paid for by" and the name of the committee on all political
3. That I wa Code section 68A.503 and rules 3514.44 through 4.52 prohibit the receipt belief issue PACs.	
<ol> <li>That if the committee exceeds \$750 in campaign activity, a DR-1 Statement of Organiza discipsions reports.</li> </ol>	on must be filed within 10 days and the committee is required to file campaign
5. That this form is filled prior to the distribution or posting of political material requiring the	pald for by attribution.

Signature of Candidatio, OR, for all other committees, Chairperson

8/18/08 Date Signed